as the first introduction to new ideas and discoveries in medicine. During the reign many attempts were made to establish periodical medical publications. Some of them met with fair success, and flourished for a number of met with fair success, and nourished for a number of years; but many survived only a short time. The first journal to appear in the reign of George III was Medical Observations and Enquiries, in 1757. The next was the Medical Museum, published in 1763, and devoted to "Select Cases and Experiments, and Discoveries in Medicine and Pharmacy." After this, in 1767, the Medical Transactions of the College were begun, at the instigation of the elder Heberden and six volumes of these were of the elder Heberden, and six volumes of these were published, the last appearing in 1820. The London Medical Journal was founded in 1781 by Dr. Simmons, who was its first editor, and in 1790 it was transformed into Medical Facts and Observations. Simmons was also responsible for the birth of Medical Commentaries, which began in 1784 as the journal of the Society for Promoting Medical Knowledge, but it ceased after a few years.

Medical and Chirurgical Knowledge enjoyed a longer
career, beginning in 1793, and lasting until 1818. The next journal to appear was the Annals of Medicine, which began in 1796 and survived until 1804. The London Medical Review and Magazine existed from 1799 to 1802, and at the same time appeared the Medical and Physical Journal, which survived until 1806. In 1806 Medical Observations came into being, but was discontinued two years later. In 1808 the London Medical Review and the London Medical and Surgical Spectator first saw light; the former died in 1811 and the latter in 1809. The London Medical Reports and the London Medical, Surgical, and The Pharmaceutical Journal began in 1814, and both lasted for more than ten years. In addition, the Transactions of the Medical Society, the Medico-Chirurgical Society, and the Philosophical Transactions were in being.

It was not until 1823 that the Lancet appeared, and quickly enjoyed a wide popularity. The cause of its success was to be found in its advocacy of medical reform, which was sadly needed, and in the ability with which it was conducted. It not only appealed to the strictly medical mind, but adopted a truculent tone towards existing medical authority, which was relished by the more progressive spirits. Its methods were sometimes questionable, but always undeniably clever, and although such matter as the incomparable "Intercepted Letters" by Wardrop excited great interest, the fact cannot be denied that the good taste of such journalism was very doubtful.

(To be continued.)

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

CALCULOUS PYONEPHROSIS: NEPHRECTOMY: LATERAL LIGATION OF THE INFERIOR VENA CAVA: RECOVERY.

THE following case is of special interest at the present time as an instance of recovery following diminution of the calibre of the inferior vena cava.

Mrs. J. was admitted under my care into the Margam Hospital in November, 1916. She was suffering from a swelling in the right hypochondrium and lumbar region, and gave a history of pyuria and intermittent severe attacks of lumbar pain extending over twelve years. A diagnosis of pyonephrosis was made. Cystoscopic examination revealed functional activity only of the left kidney.

Operation.—The lumbar route was chosen. The right kidney was freed and delivered except at the lower pole, where it was fairly firmly adherent to the inferior vena cava. From this structure it was with difficulty cut away, leaving, as was thought, a safe margin of renal (or fibrous) tissue attached laterally to the vein. A few minutes after its complete delivery a sudden rush of venous blood indicated that the wall of the inferior vena cava had given way. The venous trunk was temporarily obliterated digitally, while the hilum was rapidly clamped, and the kidney removed with all speed to gain room. The lumbar wound was quickly enlarged downwards and forwards, and the vena cava brought as near to the surface as possible. An attempt to suture the rent in the vein by Lembert sutures resulted in failure, as the structure was too softened to hold the sutures. Lateral forcipressure was

resorted to. Two pairs of artery forceps, with broad noses and close shanks (to avoid future trouble from intertwining of granulations), were applied in juxtaposition, and their shanks tied together with ribbon gauze. By their bite these narrowed the lumen of the vessel to about two-thirds of its circumference. The hilum was now dealt with. The wound was plugged with gauze, and, with the exception of two through and through sutures, was allowed to heal by granulation.

The kidney, completely disorganized, measured 8 in, by 4 in., contained eight large stones, and was merely a bag of pus and venous blood, which had, I believe, leaked into its lower pole from the diseased and eroded inferior

vena cava.

The gauze was left in situ for three days. After-treatment consisted of irrigation with eusol and light plugging. The forceps were allowed to remain for fourteen days, being gently tempted from their lairs from the tenth day onward.

With the exception of an ominous rigor on the fifth day (treated with large doses of aspirin and citric acid), the

patient made an uninterrupted recovery.

Seen afterwards, she said that for about a month she suffered from "dropsy" of her legs, which gradually subsided, and that she had lost about four times the usual quantity of blood at each menstrual period, but that the last period showed a decrease.

E. W. M. HUBERT PHILLIPS, M.A., M.B., B.S.OXON., Surgeon to Miss Talbot's Hospital, Port Talbot.

Reports of Societies.

VALUE AND LIMITATIONS OF SANATORIUM TREATMENT FOR TUBERCULOSIS.

THE discussion on this subject (see British Medical Journal, November 17th, p. 650) was continued at the meeting of the Medical Society of London on November 19th, when the President, Sir STCLAIR THOMSON, was in the chair.

Sir RICHARD DOUGLAS POWELL said that the importance of the direct agency of infection in the production of tuberculosis should not be exaggerated. If there were no dirty surroundings and bad habits of life the infection of tuberculosis would almost cease to be operative. The ultimate object of treatment was to help the patient to secure immunity—a power of resistance amounting to a safeguard against fresh attacks of the disease. Some patients would acquire immunity without treatment, and post-mortem observations revealed many such cases. Some attained a practical immunity who could by no means be regarded as cured of pulmonary tuberculosis. He had seen many people with considerable lesion in one lung, for many years with chronic cough and expectoration, more or less bacillus-laden, who seemed immune from fresh attack, and ultimately died of some other disease, amongst which cancer and some gouty affections would, he thought. be found relatively prevalent. The disease in such cases was localized and circumscribed by fibrosis. Many cases did well without sanatorium treatment; the margin of difference in favour of sanatorium over general hygienic management was much less than might be expected. On the whole, his firm opinion was that sanatorium treatment was, without doubt, the best, not only in the interests of the community but, in properly chosen cases, also of the individual patient. It would be well to have more subdivisions in sanatoriums, and he suggested (1) a hospital department for acute cases requiring constant nursing and medical treatment; (2) a department for advanced cases; (3) a sanatorium proper with full equipment for cases selected from the two preceding and for incipient and quiescent cases in which immunity was in sight—athletic and industrial exercises would be provided in this department; (4) associated châlets in groups for convalescent and after care cases. Referring to after-treatment, he said that the patients' prospects depended largely on their own intelligence and care, but also on the condition of life to which they returned. He thought insurance might help, and that some arrangement might be made whereby employees, when definitely attacked with tuberculosis, should receive a certain portion of their

of his death he was president of the Attercliffe Medical Guild. He took an active interest in local affairs, built model workers' dwellings, and was zealous in alleviating the hardships of Belgian refugees. To the last he was a strenuous worker against what he deemed the enslavement of his profession by the National Insurance legislation. His keen interest in the affairs of his native country never flagged, and he was connected with many Irish societies in the city of Sheffield. More than thirty of his medical colleagues paid a last tribute to his memory by their presence at the graveside, including his life-long friends, Dr. P. Bennett and Lieut.-Colonel Sinclair White. There were also delegates from friendly societies, and a great gathering of relations and friends. He leaves a widow and four daughters.

WE regret to announce the death, at the age of 43, of Dr. J. RAMBOUSEK, Professor of Factory Hygiene, and Chief State Health Officer, Prague. He was recognized as one of the leading writers and workers on factory hygiene on the Continent, and it was noteworthy how ably he seemed to combine the duties of professor, inspector, and laboratory worker. His industry in collecting material for anything about which he wrote was remarkable. He was best known by his book Gewerbliche Vergiftungen, which was translated into English, and published by Edward Arnold in 1913 under the title of Industrial Poisoning from Fumes, Gases, and Poisons of Manufacturing Processes. In 1911 he made a short visit to England, which he much enjoyed, leaving behind him the impression of a delightful personality.

Anibersities and Colleges.

UNIVERSITY OF LONDON.
THE following candidates have been successful at the examinations indicated:

THIRD M.B., B.S.—*Bertha Hinde, *†A. E. P. Parker (University Medal), A. L. Abel, F. M. Allchin, Hannah K. Alton, Elizabeth L. Ashby, R. T. Bailey, Majorie A. Blandy, Marian N. Bostock, Margaret S. G. Bott, F. Caldecott, Hari Das, T. A. Davies, Phyllis D. Dixon, W. H. Dupré, K. R. Hill, H. M. Holt, H. C. Jennings, W. A. E. Karunaratne, W. H. Lloyd, B. Maclean, Sinnethamby Muttiah, M. H. Oldershaw, N. Olivier, Mariamne O. Ramsay, C. S. L. Roberts, K. M. Ross, H. Rowan, M. Schwartz, S. C. Shaw, Ellen Sylk, C. H. Warner, R. E. S. Webb.

B.S.—*H. H. Greenwood.

* Distinguished in Suygery.

* Distinguished in Surgery. † Distinguished in Medicine.

The following have passed in one of the two groups of

THIBD M.B., B.S.—Group I: Ruth Balfour, G. W. J. Bousfield, P. S. Clarke, H. L. G. Foxell, Blanche A. M. Henderson, C. H. Marshall, Marie A. Moralt, A. Selby-Green, A. L. Telling, J. de S. Wijeyeratne. Group II: F. P. Bennett, L. B. Goldschmidt, D. J. A. Lewis, W. L. Thomas, Naomi Tribe.

UNIVERSITY OF EDINBURGH.

AT a meeting of the University Court, on November 12th, Dr. W. G. Aitchison Robertson was appointed additional examiner in forensic medicine, and the professor of pathology was added to the Faculty of Science.

UNIVERSITY OF ABERDEEN.

THE University Court, at its meeting on November 13th, agreed to adopt the federated superannuation system for such members of the university staff as were qualified to take

members of the university staff as were qualified to take advantage of it.

The Court has received intimation of a bequest by the late Dr. Archibald Carmichael, formerly of Barrow-in-Furness, and lately residing at Perth, of the residue of his estate, subject to certain life interests, "for the advancement of the work of the medical side of the University in such manner and subject to such regulations as the Senatus Academicus of the same University may from time to time determine and think fit." The value of the residue is understood to amount to £12,000. The wide discretionary powers given to the university in the application of the benefaction will make it the more useful.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.
THE annual meeting of the Fellows and Members of the Royal
College of Surgeons of England was called for November 15th,
but on the Vice-President, Mr. Charters Symonds, C.B., taking
the chair, a quorum was not present. After waiting the required fifteen minutes, and the numbers present still wanting
half of the necessary thirty, Mr. Symonds declared that no
meeting could be held. He added that as this was the second
consecutive occasion on which an annual meeting had been
called and a quorum had been unobtainable, it would be a matter
for the Council to consider whether it would be worth while to for the Council to consider whether it would be worth while to

summon a meeting for next year in the event of the war

This was the first occasion for more than thirty years that the Society of Members, or the pre-existing body known a Association of Members, had no resolution on the agenda.

The following have been successful at the examination

First Professional Examination for the Fellowship.— M. W. B. Bulman, Rustam Nusserwanji Cooper, Hilda T. Haggett, Edith M. Hall, H. L. Heimann, O. S. Hillman, C. M. Ockwell, Dorothy Pantin, R. L. Rea, Esther Rickards, W. G. D. Upjohn, J. Whittingdale.

Medical Relus.

THE late Dr. John Roberts Thomson of Bournemouth

left £59,074 gross.
DR. WALTER HENRY POLLARD, J.P., Edgbaston, has been elected Mayor of the borough of Smethwick.

THE King has given £5,000 to King George's Fund for Sailors, and the chairman, the Duke of Connaught, £500. The fund now amounts to £210,000; the cost of collection has been only $\frac{1}{2}$ per cent.

FIFTY silver, eleven silver gilt, and seventy-five bronze medals have been awarded to workers in the American hospital at Neuilly. Among the recipients there are thirty-seven men and ninety-nine women, mostly American.

THE usual Christmas bazaar arranged by Gamage (Holborn) will this year include woollen goods—socks, scarves, cardigan jackets, and gloves—for men in the navy and army, and also games and gramophones for men in hospital.

AT the meeting of the Royal Society on November 8th Professor A. D. Waller made a communication showing by demonstration that emotional response of the human subject is characterized (and can be measured) by alterations of the electrical resistance of the skin, independent of the well-known muscular and vasomotor and secretory manifestations of emotion.

A BRONZE mural tablet in memory of the late Dr. W. A. Haslam was recently unveiled at the Corporation Sanatorium, Cottingham, by the Lord Mayor of Hull. Dr. Haslam died on September 1st, 1916, from malignant scarlet fever contracted in the performance of his duties as medical officer of the Hull Corporation isolation hospital and sanatorium. and sanatorium. An obituary notice appeared in the Journal of September 16th, 1916.

THE report of the Yellow Fever Commission of the Rockefeller Foundation which sailed from New York on June 14th, 1916, and finished its work in South America in December of the same year, has recently been issued. The only endemic centre of the disease which the Commission could find at present was in Guyaquil, Ecuador. Certain South American countries are said to require close observation, and General Gorgas was appointed to direct this work, which, however, has been postponed in the meantime owing to the war.

AT a meeting of the West London Medico-Chirurgical Society on Friday, December 7th, papers on the methods of detecting simulated deafness and blindness will be read respectively by Mr. Richard Lake and Mr. Percy Dunn. respectively by Mr. Richard Lake and Mr. Percy Dunn. Those who are expected to take part in the discussion of these papers are Mr. H. Tilley, Mr. Roxburgh, Mr. Mark Hovell, Mr. O'Malley, Major Goldsmith, C.A.M.C., Captain McCulloch (Toronto), Dr. Potter, and Captain Heron.

A CHAPTER of a strange story was opened at Bow Street Police Court on November 19th, when "Edward Yeates, describing himself as a medical practitioner and a captain in the New Zealand Medical Corps. surrendered to him

the New Zealand Medical Corps, surrendered to his bail to answer the charge of wearing military uniform without lawful authority." He is a medical practitioner whose name was entered on the Medical Register in 1886, and became a Fellow of the Royal College of Surgeons in Ireland in 1893. The magistrate ordered a remand until November 26th, and accepted bail. The facts will then, no doubt, be placed fully before the court. We may note that the accused denied the charge that he wore military uniform without lawful authority. He also stated that the notification in the New Zealand Gazette of July 22nd, 1915, which he produced, to the effect that "the notice dated January 28, 1915, relative to the appointment of Edward Yeates, F.R.C.S.I., is cancelled at his own request" was untrue. We believe that it will be shown that the appointment was not cancelled by his request, but that, on the contrary, he demanded an inquiry, which, we are told, was ordered but not held. We refrain from further comment for the present.